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Fill in this information to identify the case:	1 age 1			
Debtor Name				
Debiti Name				
United States Bankruptcy Court for the: District of				
Case number:		Check if amende		an
			3	
Official Form 425C				
Monthly Operating Report for Small Business Und	der Chanter 11		1	2/17
Working Operating Report for Small Business one	der enapter 11		'	2/17
Month:	Date report filed:	MM / DD / Y	/YY	
Line of business:	NAISC code:			
In accordance with title 28, section 1746, of the United States Code, I declar	re under nenalty of neriury			
that I have examined the following small business monthly operating report	t and the accompanying			
attachments and, to the best of my knowledge, these documents are true, c	correct, and complete.			
Responsible party: Glay Gin				
Original signature of responsible party				
Printed name of responsible party				
1. Questionnaire				
Answer all questions on behalf of the debtor for the period covered by this rep	nort unless otherwise indicate	d		
Allower all questions on behalf of the debter for the period covered by this rep	port, unicos otnerwise indicate	Yes	No	N/A
If you answer No to any of the questions in lines 1-9, attach an explain	anation and label it Exhibit A	<u>1</u>		
1. Did the business operate during the entire reporting period?				
2. Do you plan to continue to operate the business next month?				
3. Have you paid all of your bills on time?				
4. Did you pay your employees on time?				
5. Have you deposited all the receipts for your business into debtor in possession	on (DIP) accounts?			
6. Have you timely filed your tax returns and paid all of your taxes?				
7. Have you timely filed all other required government filings?				
8. Are you current on your quarterly fee payments to the U.S. Trustee or Bankru	uptcy Administrator?			
9. Have you timely paid all of your insurance premiums?			_	
If you answer Yes to any of the questions in lines 10-18, attach an e	explanation and label it <i>Exhib</i>	<u>oit B.</u> □		
10. Do you have any bank accounts open other than the DIP accounts?				
11. Have you sold any assets other than inventory?				
12. Have you sold or transferred any assets or provided services to anyone relate	ed to the DIP in any way?			
13. Did any insurance company cancel your policy?				
14. Did you have any unusual or significant unanticipated expenses?				
15. Have you borrowed money from anyone or has anyone made any payments	on your behalf?			
16. Has anyone made an investment in your business?				

ebtor N	ameGries & Associates, LLC		
17.	Have you paid any bills you owed before you filed bankruptcy?		
18.	Have you allowed any checks to clear the bank that were issued before you filed bankruptcy?		
	2. Summary of Cash Activity for All Accounts		
19.	Total opening balance of all accounts		
	This amount must equal what you reported as the cash on hand at the end of the month in the previous month. If this is your first report, report the total cash on hand as of the date of the filing of this case.	\$_	_
20.	Total cash receipts		
	Attach a listing of all cash received for the month and label it <i>Exhibit C</i> . Include all cash received even if you have not deposited it at the bank, collections on receivables, credit card deposits, cash received from other parties, or loans, gifts, or payments made by other parties on your behalf. Do not attach bank statements in lieu of <i>Exhibit C</i> .		
	Report the total from Exhibit C here.		
21.	Total cash disbursements		
	Attach a listing of all payments you made in the month and label it <i>Exhibit D</i> . List the date paid, payee, purpose, and amount. Include all cash payments, debit card transactions, checks issued even if they have not cleared the bank, outstanding checks issued before the bankruptcy was filed that were allowed to clear this month, and payments made by other parties on your behalf. Do not attach bank statements in lieu of <i>Exhibit D</i> .		
	Report the total from <i>Exhibit D</i> here.		
22.	Net cash flow		
	Subtract line 21 from line 20 and report the result here. This amount may be different from what you may have calculated as <i>net profit</i> .	+ \$_	
23.	Cash on hand at the end of the month		
	Add line 22 + line 19. Report the result here.		
	Report this figure as the cash on hand at the beginning of the month on your next operating report.	= \$_	 _
	This amount may not match your bank account balance because you may have outstanding checks that have not cleared the bank or deposits in transit.		
	2 Unnaid Pilla		
	3. Unpaid Bills		
	Attach a list of all debts (including taxes) which you have incurred since the date you filed bankruptcy but have not paid. Label it <i>Exhibit E</i> . Include the date the debt was incurred, who is owed the money, the purpose of the debt, and when the debt is due. Report the total from <i>Exhibit E</i> here.		
24.	Total payables	\$_	
	(Exhibit E)		

Debtor Name	Gries & Associates, LLC	Case number

4.	Money	Owed	to	You
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Attach a list of all amounts owed to you by your customers for work you have done or merchandise you have sold. Include amounts owed to you both before, and after you filed bankruptcy. Label it *Exhibit F*. Identify who owes you money, how much is owed, and when payment is due. Report the total from *Exhibit F* here.

25.	Total receivables	\$

(Exhibit F)

5.	Em	pl	O١	/ee	28
•-		Γ.	_,	_	

- 26. What was the number of employees when the case was filed?
- 27. What is the number of employees as of the date of this monthly report?

6. Professional Fees

28. How much have you paid this month in professional fees related to this bankruptcy case?

- \$ _____
- 29. How much have you paid in professional fees related to this bankruptcy case since the case was filed?
- \$ _____

30. How much have you paid this month in other professional fees?

31. How much have you paid in total other professional fees since filing the case?

7. Projections

Compare your actual cash receipts and disbursements to what you projected in the previous month. Projected figures in the first month should match those provided at the initial debtor interview, if any.

	Column A Projected	_	Column B Actual	=	Column C Difference
	Copy lines 35-37 from the previous month's report.		Copy lines 20-22 of this report.		Subtract Column B from Column A.
32. Cash receipts	\$	-	\$	=	\$
33. Cash disbursements	\$	-	\$	=	\$
34. Net cash flow	\$	-	\$	=	\$

35. Total projected cash receipts for the next month:

\$

36. Total projected cash disbursements for the next month:

- \$ _____

37. Total projected net cash flow for the next month:

=\$_____

Debtor Name	Gries & Associates, LLC	<u>Cas</u> e number	
	8. Additional Information		
If avail	able, check the box to the left and attach copies	of the following documents.	
3 8	3. Bank statements for each open account (redact	all but the last 4 digits of account numbers).	
3 9	Bank reconciliation reports for each account.		
4 0). Financial reports such as an income statement (profit & loss) and/or balance sheet.	
4 1	. Budget, projection, or forecast reports.		

42. Project, job costing, or work-in-progress reports.

17465 Spring Cypress Road Cypress, TX 77429

GRIES AND ASSOCIATES LLC 20706 GREAT PINES DR CYPRESS TX 77433-3688

ACCOUNT #

2739

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LIFEGREEN BUSINESS CHECKING

December 21, 2023 through December 29, 2023

SUMMARY					
Beginning Balance	\$0.00	Minimum Balance	\$100		
Deposits & Credits	\$100.44 +	Average Balance	\$100		
Withdrawals	\$0.44 -				
Fees	\$0.00 -				
Automatic Transfers	\$0.00 +				
Checks	\$0.00 -				
Ending Balance	\$100.00				

DEPOSITS & CREDITS						
12/21 12/29 12/29		k You Acctverify Blaze Gries Acctverify Blaze Gries			100.00 0.09 0.35	
				Total Deposits & Credits	\$100.44	
			WITHDRAWALS	3		
12/29	Amegy Bank	Acctverify Blaze Gries	Gries, Blaze		0.44	

	DAILY BALANCE SUMMARY					
Date	Balance	Date	Balance			
12/21	1 100.00	12/29	100.00			



Cypress, TX 77429

REGIONS

GRIES AND ASSOCIATES LLC 20706 GREAT PINES DR CYPRESS TX 77433-3688

ACCOUNT #

2739

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PRICING FOR CERTAIN TREASURY MANAGEMENT SERVICES AND ANALYZED DEPOSITORY PRODUCTS IS CHANGING EFFECTIVE JANUARY 1, 2024. CHANGES WILL BE REFLECTED BEGINNING WITH THE JANUARY ANALYSIS STATEMENT YOU WILL RECEIVE IN FEBRUARY. TO VIEW ALL CHANGES, VISIT REGIONS.COM/SPECIALMESSAGE. PLEASE CONTACT YOUR TREASURY MGMT. OFFICER WITH QUESTIONS SPECIFIC TO YOUR ACCOUNT.

Easy Steps to Balance Your Account

Checking Account

1.	Write here the amount shown on statement for ENDING BALANCE	\$
2.	Enter any deposits which have not been credited on this statement.	\$ +
3.	Total lines 1 & 2	\$ =
4.	Enter total from 4a (column on right side of page)	\$ -
5.	Subtract line 4 from line 3. This should be your checkbook balance.	\$ =

4a List any checks, payments, transfers or other withdrawals from your account that are not on this statement.

Chook		
Check	A	
No.	Amount	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
Total Enter in Line 4 at Left		

The law requires you to use "reasonable care and promptness" in examining your bank statement and any checks sent with it and to report to the Bank an unauthorized signature (i.e., a forgery), any alteration of a check, or any unauthorized endorsement. You must report any forged signatures, alterations or forged endorsements to the Bank within the time periods specified under the Deposit Agreement. If you do not do this, the Bank will not be liable to you for the losses or claims arising from the forged signatures, forged endorsements or alterations. Please see the Deposit Agreement for further explanation of your responsibilities with regard to your statement and checks. A copy of our current Deposit Agreement may be requested at any of our branch locations.

Summary of Our Error Resolution Procedures
In Case of Errors or Questions About Your Electronic Transfers
Telephone us toll-free at 1-800-734-4667
or write us at
Regions Electronic Funds Transfer Services
Post Office Box 413
Birmingham, Alabama 35201

Please contact Regions as soon as you can, if you think your statement is wrong or if you need more information about a transfer listed on your statement. We must hear from you no later than sixty (60) days after we sent the FIRST statement on which the problem or error appeared.

- (1) Tell us your name and account number.
- (2) Describe the error or the transfer you are unsure about and explain as clearly as you can why you believe it is an error or why you need more information.
- (3) Tell us the dollar amount of the suspected error.

If you tell us verbally, we may require that you send us your complaint or question in writing within ten (10) business days.

We will determine whether an error occurred within ten (10) business days after we hear from you and will correct any error promptly. If we need more time, however, we may take up to forty-five (45) days to investigate your complaint or question (ninety (90) days for POS transactions or for transfers initiated outside of the United States). If we decide to do this, we will credit your account within ten (10) business days for the amount you think is in error. If, after the investigation, we determine that no bank error occurred, we will debit your account to the extent previously credited. If we ask you to put your complaint in writing and we do not receive it within ten (10) business days, we may not credit your account.

New Accounts- If an alleged error occurred within thirty (30) days after your first deposit to your account was made, we may have up to ninety (90) days to investigate your complaint, provided we credit your account within twenty (20) business days for the amount you think is in error.

If we decide there was no error, we will send you a written explanation within three (3) business days after we finish our investigation. You may ask for copies of the documents that we used in our investigation.

FOR QUESTIONS CONCERNING THIS STATEMENT OR FOR VERIFICATION OF A PREAUTHORIZED DEPOSIT, PLEASE CALL 1-800-REGIONS (734-4667) OR VISIT YOUR NEAREST REGIONS LOCATION.

ADJ - Adjustment RI - Return Item CR - Credit SC - Service Charge OD - Overdrawn

EB - Electronic Banking NSF - Nonsufficient Funds APY - Annual Percentage Yield FWT - Federal Withholding Tax *Break in Number Sequence

You can make a deposit at the branch during business hours or at a Regions Deposit-Smart ATM, and you can also make a transfer or deposit through Regions Online Banking or Mobile Banking. To make a deposit to an overdrawn account 24 hours a day, please visit https://selfservice.regions.com.